

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross reference)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | H-S      | 866    | 15-31-01 |
| RESPONSE FORMALITY REVIEW | HC       | 907    | 9-19-01  |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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